

Mr. MORAN of Virginia. Mr. Speaker, I rise in support of the Schakowsky motion which would strike the House-passed provisions establishing new tax-free savings accounts for medical expenses, estimated to cost \$174 billion over ten years.

On June 26, 2003, I voted against the Health Savings and Affordability Act, which established these new tax-free personal savings accounts that employers could offer to their employees, along with high-deductible insurance policies.

As the House and Senate conferees continue to discuss the Medicare prescription drug legislation, the facts are still coming in that this bill will be a blow to the 12 million Medicare beneficiaries who currently receive prescription drug coverage through their employer retiree plans.

In most cases, their employer prescription drug coverage is significantly better than what they would receive under the Republican Medicare Prescription Drug plans.

It is also troubling to note that about one-third of employers who are currently providing retiree prescription drug benefits will drop that coverage if H.R. 1 becomes law. This means more than 4 million Medicare beneficiaries will be worse off.

Both H.R. 1 and S. 1 exclude employer-provided coverage as counting towards meeting the catastrophic cap on beneficiary spending in their "true out of pocket" definition.

Retirees with employer-provided coverage will get less of a benefit than other seniors.

In fact, these retirees would need closer to \$10,000 in drug costs before the stop-loss protection would apply, well after the \$5800 cap that applies to all other beneficiaries.

This will, in effect, encourage employers to drop their retiree benefits, at a difficult time when steep drug prices are prompting employers to eliminate drug benefits or cap their contributions.

I urge all my colleagues to vote in favor of the Schakowsky motion to reject the creation of the Health Savings Security and Health Savings Accounts provision and use the \$174 billion dollars to help save employer retiree prescription drug plans for our Nation's seniors.

The SPEAKER pro tempore (Mr. MURPHY). Without objection, the previous question is ordered on the motion to instruct.

There was no objection.

The SPEAKER pro tempore. The question is on the motion to instruct offered by the gentlewoman from Illinois (Ms. SCHAKOWSKY).

The question was taken; and the Speaker pro tempore announced that the yeas appeared to have it.

Ms. SCHAKOWSKY. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

ADJOURNMENT TO FRIDAY, OCTOBER 10, 2003

Mr. CRANE. Mr. Speaker, I ask unanimous consent that when the House adjourns today, it adjourn to meet at 10 a.m. on Friday, October 10, 2003.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Illinois?

There was no objection.

ADJOURNMENT FROM FRIDAY, OCTOBER 10, 2003 TO TUESDAY, OCTOBER 14, 2003

Mr. CRANE. Mr. Speaker, I ask unanimous consent that when the House adjourns on Friday, October 10, 2003, it adjourn to meet at noon on Tuesday, October 14, 2003.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Illinois?

There was no objection.

HOUR OF MEETING ON WEDNESDAY, OCTOBER 15, 2003

Mr. CRANE. Mr. Speaker, I ask unanimous consent that when the House adjourns on Tuesday, October 14, 2003, it adjourn to meet at 2 p.m. on Wednesday, October 15, 2003.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Illinois?

There was no objection.

DISPENSING WITH CALENDAR WEDNESDAY BUSINESS ON WEDNESDAY NEXT

Mr. CRANE. Mr. Speaker, I ask unanimous consent that the business in order under the Calendar Wednesday rule be dispensed with on Wednesday next.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Illinois?

There was no objection.

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SPECIAL ORDERS

The SPEAKER pro tempore (Mr. MURPHY). Under the Speaker's announced policy of January 7, 2003, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

REIMPORTATION

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Illinois (Mr. EMANUEL) is recognized for 5 minutes.

Mr. EMANUEL. Mr. Speaker, just yesterday in USA Today they ran a story, "Once Just a Trickle, Canada's Rx drugs pouring into the United States" and predicting that it is now coming close to \$1 billion worth of business where people are buying their medications, name brand drugs, from Canada. And why? Because the same drugs that we have developed here, the name brand drugs, are in Canada for 40 to 50 percent cheaper than they are at our local pharmacy and drugstore. We cannot afford the drugs we need, and

we are not doing enough here in Washington to help make that medication accessible.

We passed a piece of legislation back in July with 88 Republican votes and 153 Democratic votes that brought competition and choice to the pricing of pharmaceutical medications. Today if one went to Europe and Canada for the same medications dealing with blood pressure, cholesterol, heart disease, those medications are 40 or 50 percent cheaper than they are in the United States. Why? Because in those countries they have competition, and it makes the prices go down. If we brought competition and choice to the market, we could actually have the type of prices that are being afforded right now in both Canada and in Europe.

A couple statistics that are so important that people should know, a recent Families USA study found that prices of the 50 drugs most commonly used by seniors increased by three and a half times the rate of inflation. Between 2000 and 2003, seniors' expenditures on prescription drugs increased by 44 percent. Seventy-one percent of Americans think it should be legal to purchase their medications in Canada, in Europe, France, England, and Germany where prices, again, are cheaper than they are here at home. We are asking our folks here in this country to pay a premium price, the most expensive price in the world, not the best price; and we have an obligation to help them get the best price, not the most expensive price.

My governor from Illinois and governors in Minnesota and in Iowa have decided to study what the savings would be to their taxpayers and their consumers if they were to buy medications competitively. Those studies in short order will be out, and I think the Members will see that tremendous savings could be accomplished for the taxpayers in those States.

That is relevant to what we do here on the prescription drug bill. If we are about to spend \$400 billion of the taxpayers' money on the largest expansion in over 40 years on Medicare, we owe an obligation not only to the seniors who will get it but to the taxpayers who will pay it to get them the best price, not the most expensive price; and we want to use the free market principle of competition to bring prices down and to give consumers the choice that they need.

What I find interesting is that we have a \$1 billion business today going on. The FDA does not think there is anything wrong with it but all of a sudden has been lately lip-syncing the pharmaceutical industry's line by saying that there is an issue of safety. Yet they will not in any way try to deal with clamping down or stopping folks from buying those medications because they do not really believe there is a safety issue. The fact is on March 27, 2003, when the FDA testified in front of a congressional committee, when asked

if has anybody has ever been sick, if anybody ever been found to be sick, not one person has ever gotten sick by purchasing medications, name brand medications, from Canada.

The second argument that the industry puts out is somehow it will affect the research and development for new medications. The fact is the taxpayers, through the National Institutes of Health, have funded research into pharmaceutical drugs for \$27 billion a year. Second, they write off all their R&D investment and the taxpayers cover for them.

In my view, the taxpayers have been tremendously generous to the industry and to the development of new drugs and that all the new drugs, if we take a look at cancer, AIDS drugs, other types of medications, they have all been funded by taxpayer-paid research. So first the strawman made the argument about safety. In fact, the legislation we passed here in the House improved the safety by dealing with counterfeit.

Another issue is that somehow it impacts the development of new medication, life-saving medications. The fact is it does not touch it. I think we will maintain the tax credit for research and development, and we will continue to fund the National Institutes of Health to the tune of \$27 billion, and the taxpayers have been quite generous. In fact, what they are owed is a return on their investment.

So what I believe, and would hope that others have seen this article and know what they are having in their own district and as the conference meets here on the prescription drug bill, is that any piece of legislation that does not deal with price does not deal with the primary issue affecting the senior community and that we have an obligation to get them the best price and get the taxpayers the best price we can get them through a prescription drug bill that allows the free market to work. Because for too long we have had a closed market here. We need to open up the market and allow the principle of competition to work.

Second, and I think in addition to that, is that we talk about expanding Medicare. We need to ensure that for that \$400 billion we get the most for our money. Everybody today knows if they go to any senior center and talk to folks they will tell them, because there is somebody from their senior home who has gone over the border, gone into Canada and bought prescriptions filled out for everybody in the unit or everybody at the housing project, they have bought medications. We have turned our grandparents into drug runners, and that should not be illegal because what they are trying to do is meet the obligations they have for their own health.

For too long we have all heard stories of people who have cut medications in half, skipped a month so their spouse can get the medications they need. That is a health and safety risk.

This legislation that was passed out of this Congress with bipartisan majority would address that health and safety risk. It would address the need of our taxpayers who are more than willing to help get a prescription drug bill but not do it when we are paying inflated prices, sometimes as high as 60 percent, to the pharmaceutical industry. If someone takes one medication like Tamoxifen, which costs \$360 here in the United States, it fights what? Breast cancer. In Canada, it costs \$33.62. That is the difference, and it means life or death for a lot of the people here in this country.

I call on the conference to quickly pass a prescription drug bill that has this reimportation provision and ask that my colleagues look at the article the other day in USA Today.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. BURTON) is recognized for 5 minutes.

(Mr. BURTON of Indiana addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

THE BUSH ADMINISTRATION'S STEEL POLICY IS WORKING

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Pennsylvania (Mr. ENGLISH) is recognized for 5 minutes.

Mr. ENGLISH. Mr. Speaker, I rise today in strong support of President Bush's steel policy which was implemented in March, 2002, to provide the domestic steel industry with a 3-year safeguard program against a crushing surge of steel imports that had begun in 1998.

As chairman of the Congressional Steel Caucus, I have seen firsthand and heard testimony from many steel employers on the extent of the economic devastation that the industry suffered as a result of the import surge. In my view, President Bush took the courageous position to stand up for the steel industry and acted to help restore the steel industry to its competitive footing, something that, unfortunately, the previous administration had not chosen to do.

On September 19, the International Trade Commission issued a mid-term review of the 201 safeguard, which confirmed what many of us had predicted for some time, that President Bush's steel policy is working and showing substantial results. In short, the ITC mid-term review of the President's steel policy is a win for the administration and a win for steel employers and workers.

Since 2002, we have seen the domestic industry begin a heroic recovery and restructuring of the industry and groundbreaking new labor agreements. Yet critics of the steel program argue that steel consumers have unduly suffered from the tariffs imposed on se-

lected imports, and they have clamored for the elimination of the President's program. In my view, the ITC report quells those critics' voices and shows, demonstrating very clearly, that the section 201 safeguard has had minimal impact on the steel-consuming industries.

The ITC report reveals that the domestic steel industry has been doing the right things to get their companies into top shape so they could compete globally. Steel prices have stabilized at a sustainable level after an initial price spike immediately following the implementation of tariffs. This reaffirms the administration's policy and their decision to allow numerous exemptions from the tariff structure.

Serious attempts to restructure, reach groundbreaking agreements between management and labor and significant capital investments have been taken by industry, but, frankly, they cannot stop there. The 201 safeguard program must remain in place for the full 3 years and allow the industry to finish what it has begun and truly recover from devastating import surges.

Mr. Speaker, this really boils down to jobs. The 201 safeguard has stopped the hemorrhaging of jobs among steel producers, and the ITC report found that steel-consuming jobs have not been put at risk by this policy.

Since this most recent crisis in the steel sector began, over 54,000 steelworkers have lost their jobs and over 30 steel companies have had to close their doors.

We developed trade remedy laws like the 201 safeguard specifically to help our companies endure unfair import surges like the one that caused this crisis in the steel industry. We must not allow unfair foreign trade to push our steelworkers out of jobs and force more and more of our good-paying jobs offshore.

I am pleased that the ITC found at core that President Bush's steel policy is good for the industry, it is good for America, and it is good for America's industrial base. We must remain vigilant and police our markets for the sake of our steel industry, manufacturers, and the entire American economy.

I want to thank President Bush for standing up for steel, and I urge him to stick with it.

FUNDING FOR IRAQ

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Oregon (Mr. DEFAZIO) is recognized for 5 minutes.

Mr. DEFAZIO. Mr. Speaker, next week the Congress will consider the President's request that we borrow \$87 billion and indebt the American people for the next 30 years to repay that 87 billion borrowed dollars on top of the \$79 billion that Congress borrowed last April to continue the actions in Iraq and build that country. And I say "build" because the President has asked for \$20.3 billion to build Iraq, not